

MULTIPLE DEPEN.
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIM

SERIAL NO.

10 / 550272

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1							51					
2								52					
3								53					
4								54					
5								55					
6	1							56					
7		1						57					
8			1					58					
9				1				59					
10					1			60					
11						1		61					
12							1	62					
13							1	63					
14	1							64					
15		1						65					
16								66					
17								67					
18								68					
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43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	3												
TOTAL DEP.	12												
TOTAL CLAIMS	15												